

L16 000 119 224

1

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

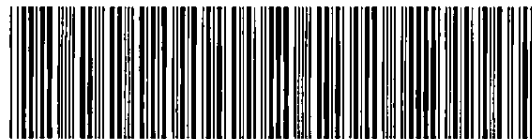
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300429513083

05/31/24--01028--001 **25.00

FILED

2024 MAY 31 PM 4:15

STATE
CLERK
OFFICE

SIMONSEN LAW FIRM, P.C.

106 E. Queen Street - P. O. Box 848 - Edenton, NC 27932

Telephone (252) 482-2175

www.simonsenlawfirm.com

LARS P. SIMONSEN

Attorney at Law

lars@simonsenlawfirm.com

MICAH R. SIMONSEN

Attorney at Law

micah@simonsenlawfirm.com

May 23, 2024

Registration Division
Division of Corporations
P. O. Box 6327
Tallahassee, FL, 32314

Re: Nterone LATAM, LLC
Amendment to Articles of Incorporation
Name Change

To Whom it may concern:

I have enclosed Articles of Amendment to change the name of NterOne LATAM, LLC to ENTERONE LATAM, LLC. A check in the amount of \$25.00 is enclosed to cover the filing fee. Please return all correspondence regarding this matter to the following:

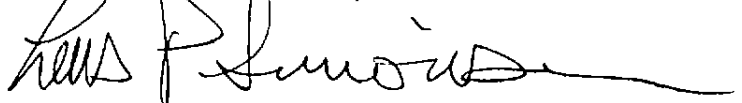
Lars P. Simonsen
Simonsen Law Firm, P.C.
P. O. Box 848
Edenton, NC 27932

If you need further information regarding this matter, you may call me at (252) 482-2175 or e-mail me at lars@simonsenlawfirm.com

If you have any questions, feel free to contact me. I am

Sincerely yours,

SIMONSEN LAW FIRM, P.C.

A handwritten signature in black ink, appearing to read 'Lars P. Simonsen', written over the printed name of the firm.

Lars P. Simonsen

NterOne LATAM, LLC

The Articles of Organization for this Limited Liability Company were filed on June 23, 2016 and assigned
Florida document number L16000119224.

ENTERONE LATAM, LLC

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

Civ.

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Kirk J Hundley
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00